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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|--|----------------|------------------------|-------------------|
| | | Application Number | 10/577,749 |
| | | Filing Date | November 1, 2004 |
| | | First Named Inventor | Michimasa UEMATSU |
| | | Art Unit | 2178 |
| | | Examiner Name | K. Stork |
| Total Number of Pages in This Submission | 5 + 3 Refs. | Attorney Docket Number | 448252001300 |

ENCLOSURES (Check all that apply)

| | | |
|--|---|---|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to TC |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Terminal Disclaimer | <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Request for Refund | 1. Form PTO/SB/08A/B (1 page) |
| <input checked="" type="checkbox"/> Information Disclosure Statement (3 pages) | <input type="checkbox"/> CD, Number of CD(s) _____ | 2. Three (3) References |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Landscape Table on CD | |
| <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application | <input type="checkbox"/> Remarks | |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|--|----------|--------|
| Firm Name | MORRISON & FOERSTER LLP (Customer No. 20872) | | |
| Signature | /Peter J. Yim/ | | |
| Printed name | Peter J. Yim | | |
| Date | May 5, 2008 | Reg. No. | 44,417 |